

THE  
BOSTON MEDICAL AND SURGICAL  
JOURNAL.

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VOL. XIII.]

WEDNESDAY, JANUARY 13, 1836.

[NO. 23.

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PHYSICAL AND MORAL EVILS OF THE PRESENT SYSTEM OF  
FEMALE EDUCATION IN THE UNITED STATES.

*To the Editor of the Boston Medical and Surgical Journal.*

SIR,—It was a remark made by Spurzheim, that in no country which he had visited, had he seen the women look so pale, languid and feeble, as in this, and he attributed it to the small amount of exercise which they had. When he made this remark, he referred particularly to those who resided in the cities of Boston and New York. He had at this time had but little opportunity to extend his observation into the interior. I think we can all attest to the truth of the observation. I heard an eminent physician say, in one of his lectures, a few years since, that the inhabitants of Boston would soon become mentally and physically an imbecile race, unless the young men selected their wives from the country, for, so far as his observation extended, three fourths of the young ladies in the higher circles of society had curvature of the spine, or some other chronic disease, which would make them invalids for life. No one would doubt that the Doctor has had an abundant field for observation, or would be inclined to question his veracity, were his name announced.

I think the observation of every man will convince him that there is something radically wrong in the present system of education among young ladies. Their physical condition does not receive from parents or teachers that consideration which it deserves. It is in early life, while they are under the watchful eye of their parents and teachers, that the seeds of those diseases are sown, which are to make them ever after miserable. It is while young that their constitutions are invigorated and strengthened, or weakened and destroyed. What is the course pursued by many parents in this city, in educating their daughters? They are sent to school when they are three or four years old, confined there for hours together in one position, and when they are released for the day, instead of being allowed to play like the boys, they must return home and be confined to a warm nursery till the time again arrives for them to go to school. This is the course for a few years, and during this period they have very little time for relaxation. By and by their forms begin to be developed—they are getting to be young ladies, that is, 9 or 10 years of age;—their mothers begin to think of their future appearance in the world; their forms must receive some attention, their skins must be kept fair, and they must learn a little French, Latin, Music, Astronomy, Natural Philosophy, Natural History, and a variety of other important sciences—and all at once—for at 14 or 15 they must finish their education and be brought out.

Accordingly their bodies are encased in whalebone, their faces are veiled if they venture into the open air, and their heads crowded with such a variety of studies that it is impossible for them to understand any of them. I do not think this an over-drawn picture. At any rate it is drawn from facts which, if not very common, have come under my own observation. If such a course as this does not destroy both the physical and mental powers of all who come under its discipline, it is because they are both originally strong. It must at least relax and weaken the most robust body and vigorous intellect. My opinion is, that no man or woman can have a calm and powerful intellect, capable of effecting great things, who has not a sound body. In fact I will go farther, and say that I do not believe that a man or woman is capable of conducting the ordinary concerns of life, or of managing a family, who has not a sound body. What are the physical effects produced by a want of exercise in the open air—by long confinement to a school room—by ill-ventilated sleeping rooms, tight lacing, and over mental excitement? They are a morbid growth of the body, a narrow, contracted chest, flaccid muscles, curvature of the spine, indigestion, a torpid state of the intestines, a precocious development of the sexual organs, nervous irritability, and the development of tubercles. Any one of these difficulties is enough to excite the imagination, sour the temper, vitiate the taste, distort the judgment, and destroy the happiness of the naturally best child in existence. It may be said that parents desire to have their daughters beautiful, healthy, and accomplished. This is unquestionably true, and yet they take the very means to make them the opposite. Now this must be the result of ignorance—or else their ideas of beauty and intelligence consist in a pale face, a languid and sickly body, and a distorted mind. If it arises from ignorance, they should be enlightened; if from false ideas of beauty and intelligence, their taste should be changed.

I think that there are five great faults in the present system of educating young ladies. 1. They are sent to school too young. 2. They are not allowed to take sufficient active exercise in the open air. 3. They are compelled to study too many hours in a day. 4. They engage in too many studies at one time. 5. They finish their education too young—or, in other words, they are introduced into society at a time when they are best fitted for study. The idea of sending a child, two, three, or even four years of age, to school, where it is confined in a close, heated and impure atmosphere, for four or six hours in a day, and this the year round, is indeed ridiculous. If children are sent to school at that age for three months, and are then allowed a vacation of three months, as children in the country are, perhaps their constitutions would not suffer. This desire of having learned children, exhibits a kind of vanity which is to me extremely painful, for it leads to sickness and distress.

We may sometimes obtain correct ideas of the taste and wisdom of parents, in the education of their children, by observing the management of those schools which are the most popular. I will call your attention to the regulation of a young ladies' boarding school in this vicinity, which has acquired a great reputation. In fact, such has been its popularity, that they could not take all the young ladies that have applied. It will be seen that exercise does not enter into the requirements. Rise

at 5 in the morning, wash, and prepare their rooms. Breakfast at 6. After breakfast, get their lessons. Go to the school room at 8—remain there till 12. Dine at 1-2 past 12. After dinner, get their lessons. Go to school at 2—remain there till 5. From 5 to 7, they can do what they choose: some of them take short walks, arm in arm; but most of them remain in their rooms. At 7, commence study again. At 9, retire.—I will leave you to judge of the ruinous consequences of such a discipline. A celebrated physician says—I lately visited, in a large town, a boarding school containing forty girls, and learnt, on accurate inquiry, that there was not one of the girls, who had been at the school two years, that was not more or less crooked. His patient was in this predicament, and all her companions were pallid, sallow, and listless. This school was very popular, and the lady who had charge of it was considered by the fashionable as possessing all the higher qualifications of a teacher. I could give other examples which would go still farther to prove that parents in general have no just ideas of the importance of exercise. For if they had, they would never patronize those schools where it was entirely neglected—where, in fact, it was not one of the requirements. Young ladies are required to study too many hours in a day. Six hours in a day of close study are enough for any one. One can learn as much in that time, if her mind is engaged, as she can in ten hours. I do not mean by this that young ladies should confine themselves for six successive hours to close and unremitting study, for I do not believe that any young person should study more than an hour, or at most two, without taking a little exercise either in the house or in the open air. The mind requires frequent relaxation, as much as the muscles do. The arm cannot be held in one position more than a few moments without fatiguing the muscles that are brought into exercise; but by a moment's relaxation, that position can be resumed.

Dr. Beddoes, an experienced English physician, says that children should never be confined to their books more than an hour at a time, and that those children within his knowledge that had not been confined longer than this at once, made the most rapid progress in their studies, felt the deepest interest in their books, and retained their acquisitions more firmly than those who were confined for several hours.

Young ladies engage in too many studies at one time. It is not an unsrequent occurrence for a young lady to engage in five or six different branches of science at once. It is a common, and I think a true saying, that a “jack at all trades is good at none;” and I feel sure that a young lady who recites in French, Latin, Geography, Natural Philosophy, and Music, every day, cannot understand what she learns. It appears to me to be the perfection of education to learn to concentrate all the powers and faculties of the mind upon one subject, until that is perfectly understood. If a young lady commences the study of Natural Philosophy, and pursues it to the exclusion of all other studies, she not only retains what she learns, but she reflects upon the facts which she has collected, during her hours of relaxation—and in a short time her whole soul will be engaged in it. If I wished to travel to New York, and went as far as Dedham the first day, then turned and went to Cambridge the next, and to Nahant the third, I might possibly know something of those places,

but there would be a poor prospect of my ever arriving at New York. So if I wish to obtain a perfect knowledge of any one science, and study that one hour in a day, then engage in the study of other sciences not connected with the one in which I wish to perfect myself, I may know something of all these sciences when my time for study has expired, but I shall not have accomplished my object. Let a young lady commence her studies, and confine herself to one, or at most to two, books at one time, and if she does not finish her education too early in life, she will have laid up a vast fund of knowledge, a fund from which she can ever after draw the richest draughts of enjoyment.

But ladies finish their education too early in life. In England, young ladies do not finish their education till they are twenty years of age, or more—and they are not introduced into society till this time. The consequence is, that they are generally well educated. But in this country, young ladies are considered educated and marriageable as soon as they have passed the age of puberty. It is impossible, therefore, that they should be well educated, for they have not the time, and their judgments are not sufficiently matured to understand all they should learn. I consider this forcing young ladies into society, a most baneful practice. It is fraught with the greatest danger. For example—a young lady, fifteen or sixteen years old, is introduced into society. She is beautiful, and perhaps rich. She is immediately surrounded by admirers, and all her ideas are absorbed in one. To obtain a husband, is now her object—study is at an end—her judgment is not matured—and she forms her opinions of gentlemen by their external appearance. She certainly runs the risk of being deceived; but if she is not—if she succeeds in obtaining a good husband, she is ill prepared to take charge of a family or to make him happy.

I should like to pursue this inquiry still farther, but have had time only to throw together these few loose ideas. I cannot, however, leave it without calling attention to a young ladies' school in this city, really deserving of notice. The young ladies board with the teacher, with whom they are upon the most familiar terms. They rise at 6, and attend prayers. Breakfast at 1-4 before 7. They then go to their own rooms, make their beds and prepare their wardrobes. After they have done this, they are required to take exercise in the open air for half an hour or more, not, however, without an object, for they are generally required to go and see some object of charity, or visit some curiosity. At 9, the classes are called together. They have no exercise which requires them to sit in one position more than half an hour. At 12, they have some exercise in the house. At 1-2 past 1, dress for dinner and dine at 2. At 3, they have a lesson in music, needle-work or drawing. From 1-2 past 4 to 6, take exercise in the open air. Tea at 6. From 1-2 past 6 till 8, study. Now take a little exercise about the house. From this time till 9, some one of them takes a book and reads, while the rest sit round the table and work. Retire at 1-4 before 10. They are not allowed to attend parties or balls. Their food is of the most simple kind. They are never allowed a fire in their rooms, and they are required to sleep with the door of their sleeping rooms open. They sleep on hair mattresses, and hair pillows. This school has been in operation four

years. During the whole time, the average number of scholars has been fifteen. There has been only one case during this period, that required the attendance of a physician. There has been no case of diseased spine. Several have come there in feeble health, and improved while under its discipline.

P.

*Boston, December, 1835.*

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**DR. WORKMAN'S REPLY TO DR. HEYWOOD.**

*To the Editor of the Boston Medical and Surgical Journal.*

SIR,—In the communication published in the Journal of November 4th, under the head of "Vexatious Consultations," it was expressly stated, at the outset, that the object of the article was to call the attention of the profession to the subject of medical police consultations, as one deserving their consideration. I had had it in mind for some time before, to call up this matter, hoping that some one or more gentlemen, competent to the task, might be induced, by the importance of the subject, and the glaring abuses of privilege often practised, to exhibit to the profession some well-digested code of conventional rules of conduct, which should prove effectual in correcting those abuses. A case was related, as a convenient introduction to the remarks that were to follow, after the manner and form of a *supposed* case. From the doubt implied in your remark preceding it, sir, I am induced to believe that you considered it in this light. And, as in the history of the case no names were given, only the material facts and circumstances necessary to make out a case being stated, it might have passed off as such, if Dr. Heywood had not seen fit to come forward and take the responsibility upon his own shoulders, by acknowledging himself the gentleman represented as the consulting physician. Perhaps he might have had some compunctions on reading the communication, which his conscience would not allow him to conceal.

In my remarks, however, which followed the case, no personal allusion was made to any individual, or to which any gentleman, in the habit of respecting the rights of his brethren, could take exception. They were general in the broadest sense of the term, relating to a discussion of the subject in all its bearings, in relation to the conduct of the "*counselled*," as well as of the "*counsellor*." The Doctor agrees with me "that it is an important subject and ought to be better understood." Perhaps I ought to consider myself fortunate to have his approbation on one point. But instead of discussing the matter as one of general interest to the profession, and with a view to the development of some general principles, upon which might be founded practical rules of conduct, the gentleman immediately narrows it down to a mere personal affair, and proceeds to argue his own cause.

I am well aware, Mr. Editor, that a personal contest in relation to the rights of individuals in a single case, can be of little interest to your readers, and perhaps productive of less practical benefit to the public; but as the Doctor's "*errata*," is so essentially *in errore*, I feel compelled, not only from a sense of duty to myself, but in justice to him, to analyze

his paper, in order to exhibit the *raw material* of which it is fabricated, that the public may be able to correct any incorrect conclusions they may have drawn from it.

The Doctor soon begins to exhibit his temperament, for in the very first paragraph he lets off a sly innuendo at some poor "*counselled*" gentleman, for neglecting to carry into effect "a particular course of treatment" to which he had agreed "in consultation;" and further, for retaining a patient, whom he may have been "requested to visit by his unsuspecting brother, during his temporary absence—after his return and contrary to his wishes." At whose vitals the Doctor aimed this arrow, is best known to himself. Never having been guilty of the iniquity here imputed, I have no reason to suppose that I was his target; I can assure him, therefore, that it fell harmless at my feet.

He proceeds, "in the first place," to inquire, "who was in fact the attending physician?"—and settles this inquiry as follows. "The messenger called at my house, I being absent. He, on his return, saw Dr. Workman, and without any direction from the parents of the boy, called him in." Here we have a direct and unequivocal statement from the Doctor; a treasure of rather rare occurrence in his writings. But he "has made a *slight variation*" from the truth in this statement, which, I trust, he will be obliged to me for correcting. When the boy was brought home, the father directed a messenger to go with all possible speed for the Doctor. The messenger inquired—what Doctor? The father says, go for the Doctor that has been attending at uncle Jonathan's—meaning his brother, who lived a few rods distant. And as I had, a short time previously, been attending to a badly lacerated wound at uncle Jonathan's, the messenger, supposing I was the Doctor intended to be called, came directly to my office and requested me to go in great haste; and I accordingly went. I have this statement both from the father and messenger; though their feelings evidently incline them to make it as favorable to Dr. Heywood as the truth will allow. For the remainder of the circumstances, I happen to know them myself. When counsel was proposed, as stated in my former paper, it became a question who should be called. The father says, Dr. Green is considered the greatest surgeon here—I should like to have him called to advise with you (I think these were his very words), and inquired if it would be agreeable to me. I answered—"have your choice—I have no objection to any one." Accordingly the same messenger was despatched for Dr. Green. The father, however, called to him as he was going out of the door, and said, "*If Dr. Green is not at home*, go across the street and ask Dr. Heywood to come." He presently returned, and reported that he found neither of those gentlemen at home. Dr. Green, he was informed, had gone away some distance, and was not expected soon to return; Dr. Heywood had gone to the red mills, about a mile below, and was expected every *moment* to return. He left word for Dr. H. to come. The father then said he would go himself and find Dr. H. as he was the nearest, and, turning to me, requested the privilege of taking my horse and carriage, as there was no other handy. I told him he might take them, but, as the other gentlemen were absent, he had better go directly to the Hospital and get Dr. Woodward. Soon after, Dr. Heywood arrived,

and in about ten or fifteen minutes more, Drs. Woodward and Chandler. With this statement of facts and circumstances, the truth of which, I think, the Doctor will not undertake to deny, when he has made suitable inquiries, I leave your readers to decide who was *first called*, and consequently "in such possession of the case as to entitle him to the appellation of attending physician." The Doctor says, "he was followed to his carriage, and requested by the father of the lad to take charge of the case." That Dr. H. is a much older, and consequently more experienced, physician than myself, I admit. Considering this fact, and that he has always practised in town; that I had only been a few months here, and was unknown to the parent, except as I had been attending in the neighborhood; and that it was well understood by him, at the time, that there was a difference of opinion as to the diagnosis of the case; and under the agitation of his mind caused by the sufferings of his child, it is not at all surprising that he should have chosen to have Dr. H. continue his attendance. But I ask, what was the proper course for the Doctor to pursue under the circumstances? Perhaps "most physicians" would have said, sir, I will attend with the other gentleman as often as you desire. The father stated to me at *the time*, as remarked in my former article, that Dr. Heywood *proposed* to come again. He says *now*, that it was his choice to have him continue his attendance, but he is unwilling either to admit or deny to me that the Doctor *first made* the proposition after they went out of doors. I have no doubt myself that the fact was as he stated at the time. But that he said to Dr. Heywood, "he did not intend I should have anything further to do with it," because "I did not appear to understand the case," the father now flatly denies. His denial of a most important clause of the Doctor's quotation of his words, may leave, at least, some reasonable doubt as to the correctness of the remainder.

The Doctor, in his last paragraph, makes a most dreadful thrust at my obtuseness of apprehension in not taking the hint to make my escape when a consultation was proposed. He says I "was not permitted to do anything for the boy without advice, which, to most physicians, would have been a diagnostic symptom that their services were not particularly acceptable, and would induce them to withdraw the first convenient opportunity, without waiting for more explicit information." On this point of professional etiquette, I confess my ignorance. I beg pardon, Mr. Editor, for making so long a quotation. But it contains a piece of information in regard to the etiquette of the "*counselled*," which is entirely new to me, and for which I am greatly obliged to the Doctor. And I doubt not my junior brethren will unite with me, in expressing their gratitude for such a precious morsel of instruction from so wise a master. Gentlemen, take to your heels "the first convenient opportunity," for you may know your "services are not particularly acceptable," if you are ever so unfortunate as to have a consultation proposed.

The Doctor accuses me of giving a different "diagnosis at the time" from that contained in my communication; and is particular to note in the margin, "for the truth of this statement, I have the certificates of both the other medical gentlemen present." Now I ask Dr. Heywood why he did not publish those certificates. He went twice to the Hospital

to obtain them. The first time, Dr. Woodward (probably considering his case a desperate one) advised him not to write. At the second visit he demanded certificates with a view to publication. I ask, again, why he did not publish them ? and not exhibit his meanness by referring to them in this manner. Sir, I can tell you the reason. Those certificates showed the "ignorance concealed" of the gentleman, as well as the very important "impression" to which he has alluded. Those medical gentlemen were not sufficiently subservient to his wishes ; they had the magnanimity to tell *the whole truth*. I invite the Doctor to publish the certificates, assuring him that I shall never deny any fact certified by those gentlemen : their motives as well as veracity are beyond suspicion.

The gentleman very facetiously makes several attempts to show my want of discernment. When, says he, "the correctness of that opinion was questioned, and a suggestion that the coracoid process might be broken by the head of the humerus being driven violently against it, he mistakes the effort to ascertain that circumstance, for an effort at reducing it." At reducing what ? But let us look, for a moment, at "the little attending circumstances," which doubtless "escaped the Doctor's notice." When Dr. Heywood took the arm, and *before a word had been said by me* about the diagnosis, he pronounced it a "dislocation of the humerus forward," as stated in the history before given. What was his object in the "effort at reducing," I only inferred from the "attending circumstances." He at this moment requested me to take hold of the forearm and make extension ; which I did *slightly*, while at the same time he applied his thumbs to the fore part of the humerus near the head, and with a considerable *apparent* "effort" at *something*, bore on till the patient screamed out most lustily ; he relaxed, and again renewed, the "effort," but things remained in *status quo*. If he intended by this manœuvre, "to ascertain" fracture of the coracoid process, I must certainly acknowledge my ignorance of his object. By the way, the coracoid had not been mentioned at this time. However, he then turns to me, and inquires, what do you find to be the matter with this shoulder ? I answered, "sir, examine for yourself." But, he said, if *you* have ascertained the difficulty, you may as well tell me, and save the patient the pain of further examination. I gave him an opinion as to the difficulty ; and immediately after, the other medical gentlemen came in, when Dr. Heywood varied his diagnosis, as stated in my former paper. These "little attending circumstances" were very strongly impressed on my mind at the moment, because it was evident that the Doctor, in his acuteness at diagnosis, had mistaken the case, and was giving the patient unnecessary pain. It was my opinion at the time, and is still, that his *main* object was, by some sort of finesse, to produce an impression on the minds of the parents, in order that the result might follow *as it actually did*. The two medical gentlemen present, I have no doubt, will certify to their belief in the same opinion, if Dr. Heywood will take the trouble to apply to them on the subject.

In order to get over the imputation of "ignorance concealed," however, the gentleman goes into a course of reasoning, from "little attending circumstances," all very philosophical, to be sure, to establish "the position in which the boy struck the ground," the direction of the force

applied, and consequently the nature of the injury : and having established these points so satisfactorily (to his own apprehension), I am half disposed to let it pass without marring the beauty of his theory. But I fear I should do him injustice. Passing over his philosophy, let us come directly to the very logical conclusion at which he arrives ; viz. "that the line of direction of the fall would pass very nearly diagonally between the scapula and clavicle, a little nearer the former than the latter." The "visual organs" of the other medical gentlemen present must have been considerably "deranged," or the Doctor's theory must fall to the ground. According to their vision, the force was received precisely on the anterior point of the small tuberosity (not "on the large tubercle") of the humerus, which point is pretty nearly indicated by "anterior exterior." Those gentlemen have recently examined the shoulder, and noticed the mark spoken of by the Doctor, and according to their "perceptions," the force applied must have driven the head of the humerus nearly directly backwards, as implied in my former communication. And I can assure Dr. H. that he may be furnished with a certificate to this effect, if he will give himself the trouble to apply for it ; yea, further, that they have no hesitation in saying that my diagnosis was correct, and the neck of the humerus broken, as I before asserted. The circumstances which led me to give that diagnosis, were the symptoms related in the history of the case, and of the correctness of the indication from these, every reader may judge. Dr. Heywood formed his opinion, it seems, from the "scratches on the face," &c. He does not deny the correctness of my statement of the symptoms in a single particular, neither does he deny that the humerus was broken. He evades the question entirely, and endeavors to raise a dust with his "little circumstances," to obscure the vision of your readers, and then submits the question, "whether there is any natural or physical impossibility in the supposition that the cartilage at the anterior margin of the glenoid cavity might be considerably injured" ! Sir, I might submit a thousand questions as irrelevant to the case as this. "But no crepitus, like that produced by a fractured bone, could be detected" by the Doctor, "or either of the two other medical gentlemen present." He must have labored under a singular obliquity of "perception" when he penned this assertion, for the certificates informed him that he admitted *he felt* distinctly the crepitus of fractured bones ; and I pledge myself, if he will but ask the favor, those gentlemen will now certify that they did not examine the limb at the time.

The Doctor is "a little puzzled" to comprehend how contraction of the pectoral muscle could displace the *exterior fragment forward*. I have only time to say to him, on this point, if he will a little more carefully review his anatomy, I believe the whole mystery will be explained to his satisfaction.

In a note in the margin, the gentleman again draws his long bow and lets fly his arrow, insinuating my total want of experience in the sensations produced by fractured bones, &c. Mr. Editor, I boast not of my experience ; if it prove as fallacious a guide to me as it has to Dr. Heywood, I certainly never would name it. If I have been correctly informed, it has deceived him in *other* more important cases than the present. I beg pardon, sir, but the Doctor has set the example.

But "the progress of the cure throws some light" on the case. Why did he not improve the opportunity and determine precisely what "the nature of the injury" was? He had unmolested possession of the case, and every possible facility to do this. It seems the dressings were removed and motion given to the limb on "the fourth day," without pain; "and in twelve days the dressings were all removed," and he could use "it nearly as well as the other." The patient stated, in presence of the medical gentlemen at the Hospital, that he could not use his arm *at all* for about a month after the injury. The parents informed me, that about ten or twelve days after the accident, he thought he felt the bones slip in his shoulder, and would insist upon it for several days that something was out of place; but he gradually got over this sensation, and now does not complain. All these circumstances appear a little unfortunate for the Doctor's *view* of the case, as well as for the accuracy of his judgment in discriminating the "sensations produced in the examinations of fractured and injured limbs."

Enough, I trust, and more than enough, has been said, to establish the positions taken in my former article. But there is one piece of evidence still remaining, which I cannot pass unnoticed, and that is the shoulder itself. In his haste to effect a cure, and blinded by the dogmatism of his theory, he has perpetuated the memorial of his "ignorance concealed." By removing the dressings too soon, the exact apposition of the parts was lost, and they have now become consolidated, leaving an inequality around the head of the bone, which is not only perceptible to vision, but to the touch also. The body of the humerus being a little raised and drawn forward upon the head, is there united—which renders the deformity visible at the first glance. It is so much elevated, that the large tuberosity, upon raising the elbow to a level with the shoulder, instead of playing under the acromion as usual, strikes against that process; and this explains why the lad can now use this arm "*nearly as well as the other.*" He can perform the other movements very well, but he cannot elevate the arm beyond the point above indicated, without at the same time inclining the body to the opposite side, or raising the scapula with it.

Now, in view of all these circumstances, which Dr. Heywood must have had the best opportunity of knowing, why did he not, when he discovered his mistake, act the part of a gentleman and acknowledge it, or keep silent on the subject, and not go to procuring certificates that expose his own mistakes, to hold them up as a scourge over my head? If it had been a question of diagnosis in a case of obscure internal disease, or even whether the case had been smallpox or chickenpox, there might have been some show of reason for cavilling on the subject; but in so plain a case of external injury, it is marvellous indeed that the gentleman's obstinacy should have led him to expose himself in the manner he has done.

Mr. Editor, if the Doctor had met the case fairly, stated facts correctly, and shown me to be in error in the whole or in part, I certainly would have retracted every offensive word. But he has not done this. Instead of meeting my assertions, which were direct and explicit, and, if inaccurate, capable of being refuted directly and explicitly, he has evaded

them almost entirely, and endeavored to screen himself by resorting to "little" subterfuges, and pitiful insinuations, and gross misrepresentations of the important facts in the case.

But, sir, it is unnecessary to comment further. I leave for your readers to decide from what quarter the "savor of hyæna" comes.

Worcester, Dec. 31, 1835.

WILLIAM WORKMAN.

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#### HAIR CUTTING.

[Communicated for the Boston Medical and Surgical Journal.]

IT is not a little honorable to the profession, that, in all ages, medical men have striven for the good of the race, in opposition to their own pecuniary interest. Loving money, and the blessings money will purchase, as well as any other class of men, they have yet labored to diminish the amount of their own business whenever the good of mankind has been in the opposite scale. Witness the boldness and zeal of the faculty in introducing and promoting vaccination, by which a prolific source of wealth to the profession is instantly dried up. And not boldness and zeal only. To this very day, in this most enlightened age, how many sacrifices of feeling have we not to make—how many ugly obstacles to encounter, in order to induce people to accept this rifer of our pockets and protector of *their* health and life. Witness, also, the lecture on lecture, and book on book, that has been written by medical men, to dissuade the fairer proportion of our race from the health-destroying practice of tight-lacing;—and the preachments we are always making about diet, against intemperance, exposure to cold, and numerous other of the chief sources of those diseases which furnish us our daily employment and our daily bread.

Indeed, so numerous are the subjects relating to health that have been again and again presented to and urged on the public attention, that one would imagine the whole story had long ago been told. Not so, Mr. Editor, in my view. The *great* things have indeed been told, but the *little* things have been very unwisely neglected;—things little, I mean, in themselves, but great in their consequences. A few years ago the notice of people was drawn, or rather called, through the medium of your Journal, to the injurious but common custom of covering the mouth with a silk handkerchief when in the open air, and I have reason to believe that those few and unpretending remarks did no little good. It is my desire now to point your attention to a fashion that is almost *universal*, and yet a prolific source of disorder and disease. I allude to the mode of hair-cutting now practised in this country, and, so far as I know, all over the fashionable world.

The objectionable part of this mode is, the cropping short the hair on the back part of the head and neck. In olden time, when wigs were worn, our grandfathers were used to live all the days of their lives;—now, we are fortunate if we live them half out; and these are filled up with suffering and disease. Every anatomist knows that, forth from behind the head, issues that large but most delicate and susceptible organ, the *spinal cord*. It traverses the whole length of the back, and, from

every point of it, nerves go out and penetrate and encircle the body. On the integrity of this organ depend the health and vigor of the greater portion of the trunk and extremities ; and the certainty with which a vast number of painful but little understood diseases, can be traced to disorder in this "silver cord," has been beautifully and forcibly illustrated in the recent work of Mr. Teale—a work full of practical wisdom, and valuable to every medical practitioner.

Now if any part of the living fabric requires to be guarded against exposure, it is the spinal cord,—especially at the point of its out-coming from the skull. Yet what do we see in the streets of every city and town and village ? Amid the chill blasts of winter, we see the head warmly protected by a close hat or a fur cap, and the back well covered by warm and comfortable garments ; but this very spot, the back of the head and neck, between the collar and the cap, left exposed to the cold, to the wind and the storm. As if studious to open as widely as possible this broad avenue of disease, the warm covering that a kind and careful Providence had provided for this part, is almost impiously cut short by the universal fashion of the day, and hence come a host of obscure, painful and fatal diseases that were rarely witnessed until this mode of hair-cutting was adopted.

I ask not for the restoration of the venerable wig, though I believe in my heart it was a great promoter of health, but I do entreat the public, as they value health and long life, to abandon this abominable practice, and follow the dictates of science, and the teachings of Nature, who has furnished for this critical portion of the body a warm and abundant covering.

I know but two or three men who have resisted this absurd as well as destructive fashion. One of them is the celebrated Audubon, and another is a distinguished teacher in the vicinity, scarcely less noted than the ornithologist for his safe exposure to all sorts of cold and hardship. Some persons, it is true, wear high and warm collars to their wrappers, but this is a very inadequate substitute for the natural covering. The only security is in a good crop of hair behind the head and neck. Curl it and ornament it as you choose, but allow it to grow long and thick. Away with that great absurdity in fashion—wearing the hair thick on the cap-covered crown, and cropping it short over the part that is most exposed and tender.

*Boston, January, 1836.*

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## BOSTON MEDICAL AND SURGICAL JOURNAL.

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BOSTON, JANUARY 13, 1836.

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### MEDICAL CONTROVERSY.

THE reader will notice in the Journal, to-day, an elaborate communication from Dr. Workman, in reply to Dr. Heywood. Chiefly with a view of eliciting the opinions of these talented gentlemen upon the subject of professional etiquette, which is of great importance in this thriving coun-

try, every facility has been offered them for freely discussing their grievances, even to the exclusion of other original productions. Presuming their correspondence to be now completed, we shall publish, next week, several valuable communications which cannot, with any sense of propriety, be longer delayed. In future, personal controversies will rarely be admitted into the Journal, unless peculiar circumstances demand, from a full conviction that their tendency is decidedly unfavorable to that harmony which should pervade the medical community.

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#### FIRST LINES OF PHYSIOLOGY.\*

WHEN we had occasion, a week or two since, to mention the appearance of Dr. Oliver's system of Physiology, we had not been favored with a sight of the volume. It gives us much pleasure at this time, after having examined the work, to express our favorable opinion of its merits, as a literary and scientific performance. Unfortunately for the reputation of medical writers in this country, they have too generally collected their facts from European sources, regardless of the treasury that might be drawn upon at home. Our physicians, surgeons, and public teachers, are not, we are inclined to believe, by any means inferior to those whose names have become familiar to us through the transatlantic press. Whenever a native author has industriously availed himself of the rich harvest at home, he has usually secured the respect of the learned every where. Certainly few men ever gained more for themselves or their country's fame, in the quiet pursuits of physiological inquiry, than Dr. Rush. The simplicity characterizing the volumes which are to transmit his name with profound respect to succeeding ages, gives them a peculiar charm; whilst the observations embodied by that pioneer of medicine in America, were principally gathered within the circle of his own private practice. Beck's Medical Jurisprudence is another work, in the series of American medical literature, that must command the patronage and approbation of physicians; and, if we mistake not, the work before us is destined to take rank with them. Dr. Oliver appears to have yielded to the desire of the medical pupils of Dartmouth College, in this publication—which desire certainly reflects credit upon the taste and intelligence of the class. Every chapter carries indubitable evidence of accurate scholarship. The work was expressly designed for the use of students, and it will be found, we think, an important guide for them, the whole—a fair octavo of 520 pages—being a truly valuable treatise on physiology.

A more complete analysis is in course of preparation. We cannot now leave it, however, without recommending the author's physiological labors to the encouragement and sustaining influence of the profession.

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#### TRANSMISSION OF VACCINE VIRUS.

WITH reference to the best mode of transmitting this invaluable article to distant countries, without having its peculiar properties lost or deteriorated, we now state, for the information of those who may be interested, that charged quills have been sent from this office to Persia, the high northern latitudes, the West and East Indies, the Western Islands, South America, and the remotest sections of our own country, which proved to

\* First Lines of Physiology : designed for the use of Students of Medicine. By DANIEL OLIVER, M D. Prof. of the Theory and Practice of Physic, &c. in Dartmouth College. Boston—Marsh, Capen & Lych. 1836.

be unimpaired when opened. Each point, after having been charged and re-charged, several times, is dried in the shade. This is an important circumstance to be recollected, as light is thought to have an influence in destroying its value, or at least to leave it in a condition unfavorable for being kept a long time after. A dossil of carefully-dried, clean cotton wool is then placed in the bottom of a small, thick, flint phial, with a ground stopper, and a layer of quills dropped upon it. Over these is spread a covering of cotton, and so on, alternately, till the phial is full. However much the vessel, carriage, or whatever may be the vehicle of conveyance, is agitated, the elasticity of the cotton prevents any motion of the quills amongst themselves, and consequently the scale is not shaken off or in the least degree disturbed. The glass stopper is thickly and securely covered with sealing wax. If the package is intended for a tropical climate, the entire body of the phial should be coated with the wax, and also receive several coverings of varnished paper. On the voyage, the coolest, driest and darkest part of the vessel should be selected for a place of deposit. If possible, on the day of opening the seal all the quills should be inserted, as exposure to the air, in another climate, a long while after they are charged, might be detrimental. By making arrangements for using the whole at once, if patients can possibly be mustered, fresh virus may most certainly be raised from some one of the whole, on the eighth day following.

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#### MEDICAL SCHOOLS OF PHILADELPHIA.

PHILADELPHIA has long been considered in this country as the focus of medical attraction, as Paris is on the continent of Europe. It has been stated this winter that nearly seven hundred students are at present attending the two medical schools in that city. A gentleman from this quarter, well qualified to judge, writes respecting the facilities of dissection—that “for about a month after the commencement of the term, the supply, though large, is not quite equal to the demand ; after which, the anatomical zeal begins to decline, and subjects sometimes lay unsought on the tables. On the whole, during the latter part of the course, a person might occupy as much time as he pleased in dissection. The average price of a subject is eight dollars, and a class usually consists of six persons. The dissecting rooms in each of the schools are much better arranged and more comfortable than in the Boston one” [in this we beg to dissent from our correspondent, the Boston school not being inferior, in our opinion, to any in the Union] ; “and of the two here, I think that the Jefferson (new) school is the best. But independently of anything else, Dr. Pattison’s lectures are alone worth coming for. Dr. McLellan, on Surgery, is a very original genius, and sets at naught all authorities, *as such*, but draws his principles and practice from common sense and observation. By the earnestness and vehemence of his manner, he certainly rivets one’s attention. Something of the same manner, though less in degree, characterizes some other of the professors. In short, we have no lectures delivered ‘ex cathedra.’” For further information respecting this school, the medical student is referred to the circular, published by the faculty.

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*Creosote in the Treatment of Acne indurata.*—Dr. Elliotson, of the North London Hospital, refers to a severe case of this disease, in a woman who had been afflicted with it for six or seven years, which was cured by the

administration of creosote. The patient took twelve or thirteen minimis every day for five months, having begun with a drop or two. When the dose had reached eighteen minimis, the creosote began to nauseate, and was reduced to twelve or thirteen minimis. Tar water was formerly much celebrated for chronic diseases of the skin, and from this circumstance Dr. E. was induced to try the creosote in this instance—it being an old remedy with a new face—and the result was, that the patient's old face received quite a new appearance. In some general remarks on this disease, Dr. Elliotson says it is one in which nothing can ordinarily be done. It is very common with young people when they are becoming adults, and sometimes continues after they have become adults, in both sexes. He has tried mercury, sarsaparilla, &c. but is not aware of having done any good by them. Locally he has applied stimulants with some benefit, night and morning—such as rubbing the face with citrine ointment, &c. When the disease begins with puberty, or just about puberty, it is in general only temporary; but when it comes on later, it usually becomes a permanent disease.

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*Mortality in 1835.*—The number of deaths the last year in Plymouth, Mass. containing a population of about 5000, was 61. In 1834, the number was 125.—In Hartford, Conn. exclusive of W. Hartford and the almshouse, the number of deaths in 1835 was 180. In 1834, 192.—In Salem, the number was 171, an unusually small number.—In Marblehead, 118.—In Charlestown, 146.—In Warren, R. I. with a population of 2000, the number was only 19. Of these, five were 88 years of age or upwards, one 80, one 75, and three under 21 years.—In Boston, the number was not far from 1900. Population about 78,000.

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*The Homœopathic Doctrines.*—There are three very distinct propositions embraced in homœopathy. 1. That diseases artificially produced cause immediately to cease, radically and permanently, those spontaneous diseases which are analogous to them in character. 2. That the homœopathic remedies have the property of inducing at the will of those who know how to employ them, artificial diseases of a very distinct and determinate character. 3. That remedies are efficacious, although attenuated to a degree which appears impossible (Hahnemann's own words) to vulgar physicians whose minds embrace only gross and material ideas. These propositions comprise the whole of the homœopathic doctrine—a doctrine which, like every other, however wild and ridiculous, is presented by its author as the general expression of results derived from experience.

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*Rupture of the Tendon of the Rectus Femoris.*—A case of this nature, called by some dislocation of the patella downwards, was lately successfully treated in England by Mr. Spong. The patient was placed in bed, in the sitting posture, with the right leg raised considerably higher than the left, and resting on a pillow. Leeches and evaporating lotions subdued the inflammatory symptoms. A bandage from the foot to above the knee was afterwards applied, with a slight compress on the patella. The position was strictly observed for nearly a month, when the union was complete. Three months after the accident, the patient could walk nearly as well as ever.

**Medical Miscellany.**—There are about two hundred and fifty medical students at the Transylvania University.—The smallpox is said to be rife at Covington, S. C.—Forty thousand peasants and pilgrims, it is supposed, have died of cholera, the past year, in the neighborhood of Mecca, hastened on by fatigue and want of water.—A proposition has been laid before the legislature of Georgia, to authorize an organization of the steam doctors.—A system of Simplified Anatomy has been published at Columbus, Ohio, by Dr. William Spillman, which is well recommended by the *author*.—J. A. Brown, B. P. advertises in Providence, R. I. that any persons who prefer having their fevers cured in from four to eight hours, may have the business done by the job, by the public's humble servant.—Dr. Mussey is lecturing at the Andover Institution, on the philosophy of health.—Mr. Graham is about commencing a course of lectures on the science of life, at Dedham, Mass. and also a second series on hygiene, at Phillips place, in this city.—A new tooth instrument has been announced, but it possesses no advantages, we should judge, over those already in use.—Dr. J. S. Bartlett, of this city, has become associate editor of the Boston Pilot, devoted to literature and the interests of Catholicism in America.—Dr. Strobell's private anatomical demonstrations at Columbia, S. C. have probably been very successful, as he is extremely well qualified for teaching the science.—The lectures at the Mass. Med. College will close in about four weeks.—The Cæsarean operation has recently been performed at Birmingham, Eng. and both mother and child were doing well.—Dr. Elliot, of New York, who is said to have acquired some reputation as an oculist, has become very expert in the manufacture of artificial eyes.—There is now in Boston, at the Bromfield House, Dr. Williams—called, par excellence, the celebrated English oculist—whom, by the way, we never heard of until he announced himself through the papers.

Whole number of deaths in Boston for the week ending Jan. 1, 36. Males, 15—Females, 21.

Of apoplexy, 1—consumption, 4—childbed, 1—croup, 1—dropsy on the brain, 2—infant, 5—intemperance, 1—Inflammation of the lungs, 1—lung fever, 2—measles, 4—old age, 4—stoppage in the bowels, 1—spasms, 1—scarlet fever, 2—sudden, 1—teething, 1—worms, 1—unknown, 1.

#### ADVERTISEMENTS.

##### MEDICAL SCHOOL OF MAINE.

THE Medical Lectures at Bowdoin College will commence on *Monday*, the 22d day of February, 1836.

Anatomy and Surgery, by JEPIDIAH COBB, M.D.

Theory and Practice of Physic, by WILLIAM PERRY, M.D.

Obstetrics and Medical Jurisprudence, by JAMES McKEEN, M.D.

Chemistry and Materia Medica, by PARKER CLEAVELAND, M.D.

The *Anatomical Cabinet* and the *Library* are annually increasing.

Every person, becoming a member of this Institution, is required *previously* to present *satisfactory* evidence that he possesses a good moral character.

The amount of fees for the Lectures is \$50. The Lectures continue three months.

Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

N18—Steep

Brunswick, November, 1835. P. CLEAVELAND, *Secretary.*

##### A STAND FOR A PHYSICIAN.

A PHYSICIAN in the State of Maine, in a pleasantly situated, small, flourishing village, about 25 miles from Portland, wished to dispose of his stand. Being a very eligible stand, and affording abundant practice, it offers a good opportunity for a physician to establish himself. For further particulars, apply to the Editor of the Journal; if by mail, post-paid. Sept 23—3m.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, *post-paid*. J. V. C. SMITH, M.D. Editor. It is also published in Monthly Parts, on the 1st of every month, each Part containing the weekly numbers of the preceding month, stitched in a cover. Price \$3.00 a year in advance, \$3.50 after three months, and \$4.00 if not paid within the year.—Every seventh copy, *gratis*.—Postage the same as for a newspaper.